Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Gervice ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990. Inspection A For the 2016 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number THE CENTER FOR ORGANIZATIONAL RESEARCH Address change AND EDUCATION]Name]change SEE SCHEDULE O 26-0006579 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return 1090 VERMONT AVE NW 1800 202-420-7871 termi 4,542,342City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende WASHINGTON, DC 20005 H(a) Is this a group return Applica F Name and address of principal officer RICHARD BERMAN for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) 501(c) ((insert no.) If "No," attach a list (see instructions) J Website: ► SEE SCHEDULE O H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 2002 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities RESEARCH AND EDUCATION ON ISSUES RELATED TO CONSUMER CHOICES AND THE ACTIVIST COMMUNITY (CONTINUED) Check this box Full if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 Ō. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 5,100,664. Contributions and grants (Part VIII, line 1h) 4,538,005. 5,583 - 4.054. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 125. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) О. . :: **4.1**2. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,106,372 4,542,342 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 600. Benefits paid to or for members (Part IX, column (A), line 4) 0 59,400 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)_ Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Patt IX column 11,819. 3,523,198 -3,909,918. Other expenses (Part IX, column (A), line Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)
Revenue less expenses Suptract line 18 from line 12 3,583,198 3,930,347. 611,995 1,523,174 **Beginning of Current Year** End of Year 1,729,071 20 Total assets (Part X, line 16) 317,401 OGDEN Total liabilities (Part X, line.26). 350,265. 326,600. 1,378,806. Net assets or fund balances. Subtract line 21 from line 20 990,801. Part II | Signature Block Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign LANE CARDWELL, SECRETARY/TREASURER/DIRECTOR Here Type or print name and title Date Print/Type preparer's name Check Preparer's signature lleson Paid ALYSON MILLER self-employed RICHARD BERMAN AND COMPANY, Preparer INC. Firm's EIN Firm's address **Use Only** 1090 VERMONT AVE. NW. SUITE WASHINGTON, DC 20005 Phone no. (202) 463-7100 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2016)

Form 990 (2016)

THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION 26-0006579 Page 2 Form 990 (2016) Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: TO EDUCATE THE PUBLIC ON CONSUMER ISSUES, INCLUDING THOSE RELATED TO GOVERNMENT REGULATIONS, ESPECIALLY THOSE RELATED TO PRODUCT CHOICES; TO EDUCATE THE PUBLIC ABOUT ORGANIZATIONS THAT WORK ON ISSUES RELATED TO PUBLIC POLICIES, ESPECIALLY THOSE WORKING TO INCREASE (CONTINUED) Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 7,500.) (Revenue \$ 4,054. 2,888,315. including grants of \$) (Expenses \$ MAINTAINED HUMANEWATCH.ORG, A WATCHDOG PROJECT TO EDUCATE THE PUBLIC ABOUT THE HUMANE SOCIETY OF THE UNITED STATES (HSUS), ITS MISLEADING FUNDRAISING PRACTICES, ITS DISMAL TRACK RECORD OF SUPPORTING PET SHELTERS AND ITS SUPPORT OF A RADICAL ANIMAL RIGHTS AGENDA. RESEARCHED VOLUMES OF HSUS-RELATED DOCUMENTS, INCLUDING FEDERAL TAX FORMS, NEWS ARTICLES, LEGAL AND GOVERNMENT DOCUMENTS, HSUS CORRESPONDENCE. PUBLICATIONS, AND OTHER RECORDS, WHICH THE ORGANIZATION PUBLISHES ON A DYNAMIC WEBSITE THAT GETS MORE THAN 500,000 VISITORS A YEAR. PRODUCED AND PLACED OVER \$1.3 MILLION IN ADVERTISING NATIONWIDE TO EDUCATE DONORS AND THE PUBLIC ABOUT HSUS. PROVIDED BLOG UPDATES AND DIRECT MAIL ON RESEARCH FINDINGS TO EDUCATE THE PUBLIC. EDUCATED MORE THAN HALF A MILLION FACEBOOK FANS AND TWITTER FOLLOWERS. WROTE AND DISTRIBUTED 0.) 685,677. including grants of \$ 0 •) (Revenue \$ MAINTAINED THE CENTER FOR ACCOUNTABILITY IN SCIENCE, WHICH EDUCATES PUBLIC BY DEBUNKING THE JUNK SCIENCE BEHIND THE MANY NEWS STORIES THAT BOMBARD CONSUMERS, HELPS PRESENT A BALANCED VIEW OF THE SCIENCE BEHIND THESE CLAIMS, AND EXAMINES THE ORGANIZATIONS RELEASING THESE REPORTS TO SCARE CONSUMERS. RESEARCHED AND PRODUCED EDUCATIONAL VIDEOS AND HUNDREDS OF BLOG POSTS ON ACCOUNTABLESCIENCE.COM AND THROUGH SOCIAL MEDIA ON FACEBOOK, TWITTER, AND YOUTUBE PRESENCE. PROMOTED CAS WITH ONLINE ADVERTISING. MEDIA OUTREACH TRIGGERED COVERAGE IN MORE THAN 100 MEDIA OUTLETS, INCLUDING OVER A DOZEN IN THE TOP 100 PRINT PUBLICATIONS LIKE THE WASHINGTON POST AND THE NEW YORK DAILY NEWS. PROVIDED EDUCATIONAL INFORMATION ON SCIENTIFIC ISSUES TO FEDERAL AND STATE LEGISLATORS AND STAFF. UTILIZED OVER \$420,000 IN DONATED SERVICES TO 0.) 139,542. 0 •) (Revenue \$ including grants of \$ (Code) (Expenses \$ MAINTAINED THE DYNAMIC WEBSITE CONSUMERFREEDOM.COM, EDUCATING THE PUBLIC, POLICYMAKERS, AND THE MEDIA ON ISSUES RELATED TO PUBLIC CHOICE BEVERAGE, AND OTHER CONSUMER ISSUES. RESEARCHED AND POSTED ON FOOD, BLOG POSTS ON ISSUES RELATED TO CONSUMER CHOICE. PROMOTED CONSUMER CHOICE ISSUES ON SOCIAL MEDIA PLATFORMS. PRODUCED AND PLACED APPROXIMATELY \$21,380 IN EDUCATIONAL ADVERTISEMENTS. WROTE AND PUBLISHED PRESS RELEASES, LETTERS TO THE EDITOR AND OPINION EDITORIALS IN NATIONAL AND REGIONAL NEWS PUBLICATIONS ON TOPICS RELATED TO OBESITY, FOOD CHOICES, AND OTHER CONSUMER ISSUES RESULTING IN COVERAGE ALMOST 100 MEDIA OUTLETS, INCLUDING 17 IN TOP 100 MEDIA Other program services (Describe in Schedule O.) 35,523. including grants of \$ 0. 0 •) (Revenue \$ 3,749,057.

SEE SCHEDULE O FOR CONTINUATION(S)

Total program service expenses

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26-0006579 Page 3 Part IV Checklist of Required Schedules

_			1	
	1. the annual department of a period 501(a)(a) as 40.47(a)(1) (athour there a provide four datum)(2)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A	1	х	
_	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			,
	as applicable.]		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b				v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С				х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		<u> </u>
d	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	The state of the s	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		_	
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
14a		14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			х
16	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u> </u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	- !3		
.0	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ٽ		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	X
		Form	990	(2016)

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Par	t IV Checklist of Required Schedules (continued)			·
20 -	Did the assessment on exercise and as make begantal facilities? If "Von " complete Cabadula H	00-	Yes	No X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		~
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
۲,	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	}
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Ì
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			1
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			۱
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ļ		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	 	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		Ī	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		1	х
07	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		 	┝▔
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer	, [
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		l	
	contributions? If "Yes," complete Schedule M	30	L_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			l
	If "Yes," complete Schedule N, Part I	31	├	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		ļ	
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-	1	v
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 04	1	X
250	Part V, line 1	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	358	├	 ^
IJ	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		{
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization		 	t^{-}
	If "Yes," complete Schedule R, Part V, line 2	36	1	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			

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Note. All Form 990 filers are required to complete Schedule O

Par	990 (2016) AND EDUCATION 26-0006 TV Statements Regarding Other IRS Filings and Tax Compliance	<u></u>		age 5
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			ļ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ł
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			{
	filed for the calendar year ending with or within the year covered by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	X	}
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ļ	ļ	1,,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	 -	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		├
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		ļ	
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	 -	X
ь	If "Yes," enter the name of the foreign country	i		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_	l	X
5a		<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		 ^
C		_5c	-	┼
6a		6-		x
	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		<u> </u>
Ь	were not tax deductible?	6b	ļ	l
7	Organizations that may receive deductible contributions under section 170(c).	00	 	
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	X
b	The second secon	7b	 	┿
c		,,,,		† -
·	to file Form 8282?	7c	1	X
d	1-1			1
e		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	16 the annual transfer and the state of the	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		L
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12	1	1	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	l	
11	Section 501(c)(12) organizations. Enter.			1
а	Gross income from members or shareholders	1	Í	1
b	Gross income from other sources (Do not net amounts due or paid to other sources against	[ļ	[
	amounts due or received from them.)	1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Į.	1

X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

14a Did the organization receive any payments for indoor tanning services during the tax year?

Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the

Section 501(c)(29) qualified nonprofit health insurance issuers.

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

12b

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7]		
	If there are material differences in voting rights among members of the governing body, or if the governing	1		ŀ
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1		l
b	Enter the number of voting members included in line 1a, above, who are independent	i		l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		1
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	X	\
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	1	Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	L
15	Did the process for determining compensation of the following persons include a review and approval by independent		1	1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ļ	
а	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	X	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	}	1	١
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation]	Ì]
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1	ļ	
_	exempt status with respect to such arrangements?	16b	<u> </u>	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılal	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	icial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	RICHARD BERMAN - (202) 420-7871 1090 VERMONT AVE. NW, #800, WASHINGTON, DC 20005			
	1030 VERMONI AVE. NW., WOOD, WASHINGTON, DC 20003			

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Form 990 (2016) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons.

(A)	(B)	(C) Position						(D)	(E)	(F)	
Name and Title	Average		(do not check more than one box, unless person is both an					Reportable	Reportable	Estimated	
	hours per	officer and a director/trustee)				ıs bot x/trus	h an tee)	compensation	compensation	amount of	
	week (list any	ا ا				Г	Ė	from the	from related	other	
	hours for	dırect						organization	organizations (W-2/1099-MISC)	compensation from the	
	related	se or	stee			Sate		(W-2/1099-MISC)	(11-27 1033 111100)	organization	
	organizations	trust	al tru:		yee	m m	1	(** =, ************************	,	and related	
	below	Individual trustee or director	Institutional trustee	jć	old III	est co	er			organizations	
	line)	Indiv	Instit	Officer	Key employee	Highest compensated employee	Form				
(1) RICHARD BERMAN	16.20										
PRESIDENT, EXEC. DIRECTOR		X		X		L		8,063.	0.	0.	
(2) F. LANE CARDWELL	0.15										
SECRETARY & TREASURER/DIRE		X		X		L		500.	0.	0.	
(3) JAMES BLACKSTOCK	0.15										
DIRECTOR		Х			L			500.	0.	0.	
(4) DAVID BROWNE	0.10										
DIRECTOR		Х						500.	0.	0.	
(5) DANIEL MINDUS	0.10					{			!		
DIRECTOR		Х				L		500.	0.	0.	
(6) RICHARD VERRECCHIA	0.10					1		'	_		
DIRECTOR		Х				L		500.	0.	0.	
(7) NELSON MARCHIOLI	0.10								_	_	
DIRECTOR		Х	_		_	<u> </u>		500.	0.	0.	
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AND EDUCATION

Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees	, and	d Hi	ghe	st C	compensated Employe	es (continued)	_			
(A)	(B)			((2)			(D)	(E)			(F)	
Name and title	Average		not c		more	than o		Reportable	Reportable	ļ		timate	
	hours per week					is botl x/trus		compensation from	compensation from related	ן י		ount o	of
·	(list any	ig						the	organizations	. [other oensat	กดา
	hours for	ndividual trustee or director				pa		organization	(W-2/1099-MIS			om the	
	related	stee o	rustee]	suac		(W-2/1099-MISC)		- 1	_	anızatı	
	organizations below	nal tru	onal t		oloyee	comp				ì		relate	
	line)	pwp	institutional trustee	Officer	Key employee	Highest compensated employee	Former			1	orga	nızatıc	ms
		=	┝╧╌	0	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Ξē							
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	<u> </u>		<u> </u>		<u>L</u> _	<u> </u>		11 000	! 				
1b Sub-total								11,063.		0.			0.
c Total from continuation sheets to Part V	II, Section A							11,063.		0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but r	at least of to th		linte		.	- \	<u> </u>		000 of second blue				-0 •
2 Total number of individuals (including but r compensation from the organization	iot ilmited to tr	1056	i iiSte	eu a	DOV	e) wi	IO I	eceived more than \$100	,000 of reportable	е			0
compensation from the organization				_			_					Yes	No
3 Did the organization list any former officer.	director, or tn	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on	ſ			
line 1a? If "Yes," complete Schedule J for s	such individual			•		•					3		X
4 For any individual listed on line 1a, is the si									the organization	[
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sch	edul	e J i	for such individual		l	4		<u> </u>
5 Did any person listed on line 1a receive or	-				-		elat	ted organization or indiv	idual for services	ļ		ļ	
rendered to the organization? If "Yes," con	npiete Schedul	e J 1	or s	uch	per	son					5	l	X
Section B. Independent Contractors								hh = 4 = = = = = = = = = = = = = = = = =	£100,000 of				
 Complete this table for your five highest co the organization. Report compensation for 	•	-								pens	ation i	rom	
(A)	ine calcindar y	cai	Cita	ng .	VICII	01 10		(B)	year.		(C		
Name and business	address						- 1	Description of s	ervices	С	ompei		า
RICHARD BERMAN AND COMPA	NY, INC	, :	10	90				MGMT, ADVERT	ISING,			_	
VERMONT AVE NW #800, WAS								RESEARCH & A	CCT FEES	1	<u>, 63</u>	9,5	91.
DISTRICT DIRECT LLC, 750		PO:	IN'	ΓE	R	D,							
SUITE N, GAHANNA, OH 432								MAILING SERV	ICES		66	7,6	<u>71.</u>
KATZ COMMUNICATONS, 111		NT.	IA	L]	BL	VD.					4.5		- ^
STE 110, BALA CYNWYD, PA NATIONAL CABLE COMMUNICA		<u> </u>					-	MEDIA ADVERT	ISING		4/	4,4	<u>50.</u>
BROADACRES DRIVE 3RD FL,			ר.ז	,	NT. T		Ì	MEDIA ADVERT	TETNE		24	2 0'	77
DRONDRONDO DRIVE SRD FU,	DHOOMF.	اندے		<u>, </u>	.40		ᅱ	HEDIN NOVEKI	TOTING		44	2,0	· / •
							- 1		}				
2 Total number of independent contractors (including but r	not li	mıte	ed to	tho	se li	sted	d above) who received n	nore than				
\$100,000 of compensation from the organ	zation >					4		·					
					-		-	- -			Form	9 90 (2	2016)

Form 990 (2016) AND EDUCATION
Part VIII Statement of Revenue

			Check if Schedule O contr	ains a response	or note to any lir				
			,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts st	1 :	a	Federated campaigns	1a					
اوير	1	b	Membership dues	1b]		
A, E		С	Fundraising events	1c					
護희		d	Related organizations	1d					
im',		е	Government grants (contribut	ions) 1e					
Sign		f	All other contributions, gifts, grant						
호			similar amounts not included above	ve 1f 4,	538,005.				
왕		g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts		h	Total. Add lines 1a-1f			4,538,005.	<u> </u>		
					Business Code				
8	2	а	EXPENSE REIMBUR	SEMENTS	900099	4,054.	4,054.		
او چَ		b							
S E		C							
e a		d							
Program Service Revenue		е							
٦		f	All other program service reve	enue		1 254			
_		9	Total. Add lines 2a-2f		▶	4,054.	ļ <u>-</u>		
	3		Investment income (including	dividends, inter-	est, and	1 271	[071
			other similar amounts)			271.			271.
	4		Income from investment of ta	x-exempt bond p	proceeds	<u> </u>			
	5		Royalties			 	 		
				(i) Real	(II) Personal				ì
	6		Gross rents	<u> </u>		-			1
	h		Less, rental expenses		 	4			
	ĺ		Rental income or (loss)	L		1			
			Net rental income or (loss)	() 0	(1) (1)		 		
	7	а	Gross amount from sales of	(i) Securities	(II) Other	1			
		_	assets other than inventory		 	1]
		D	Less cost or other basis		1	ì			1
		_	and sales expenses		 	1			
	1		Gain or (loss)	L		+	1		1
			Net gain or (loss) Gross income from fundraisin	a ovente (net		 			
E I	ľ	đ	including \$	of					ļ
Other Revenue	l		contributions reported on line				ļ		l
æ	[Part IV, line 18	a 10, 000		1	i i		
je Fe		h	Less: direct expenses	b		1	İ		
δ			Net income or (loss) from fund	_		†	Ì		Ì
	ſ		Gross income from gaming ad	_			-		
	۱	_	D + 0.4 1 40	, , , a		1	1		}
		b	Less: direct expenses	<u>-</u>		1	1		}
			Net income or (loss) from gan		•	1	Į į		ţ
			Gross sales of inventory, less			<u> </u>			
	"		and allowances	а		ļ			
		ь	Less: cost of goods sold			1			l
	ı		Net income or (loss) from sale	es of inventory	>	1	<u> </u>		-
	Г		Miscellaneous Reveni		Business Code				
	11	а	MEGODE E ANTONIO		900099	12.	<u> </u>		12.
		b						_	
	[С							
	1	d	All other revenue						
	{	е	Total. Add lines 11a-11d		•	12.			
	12	_	Total revenue. See instructions.		. •	4,542,342.	4,054.	0.	283.
63200	09 11	-11	-16						Form 990 (2016)

Page 10

AND EDUCATION

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A), XCheck if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (D) Fundraising (B) Program service Do not include amounts reported on lines 6b, Management and 7b. 8b, 9b, and 10b of Part VIII. general expenses expenses **expenses** Grants and other assistance to domestic organizations 7,500. 7,500. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 11,063. 3,000 8,063. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 996. 996. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 870. 870. 10 Payroll taxes Fees for services (non-employees) 1,403,297. 1,546,881. 143,584 a Management 16,420. 14,944. 1,476. Legal 16,590. 16,590. Accounting 79. 79. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 673,180. 674,109. 929. column (A) amount, list line 11g expenses on Sch O.) 1,404,945. 1,404,945. Advertising and promotion 12 32,143. 29,607. 2,444. 13 Office expenses 76,596. 76,346. Information technology Rovalties 15 16 Occupancy 34,074 33,428 646. Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,633 1,633 Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 2,800. 925. 1,875. 23 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 101,802. 101,857. 55. TAXES, LICENSES, AND FEES 1,350. SUBSCRIPTIONS AND PUBLI 1,350. 420 MISCELLANEOUS 441. 21. All other expenses 3,930,347. 3,749,057. Total functional expenses. Add lines 1 through 24e 169,471 11,819. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ____ rf_following SOP 98-2 (ASC 958-720)

Form 990 (2016)

AND EDUCATION

26-0006579 Page 11

Form 990 (2016) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 774,429. 676,705. Cash - non-interest-bearing 934,381. 1,478,478. 2 2 Savings and temporary cash investments 111,369. 57,724. 3 3 Pledges and grants receivable, net 731. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Assets 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 5,885. 6,725. 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 19,733. 10a basis. Complete Part VI of Schedule D 19,733. 0. 0. 10b 10c b Less: accumulated depreciation 11 11 investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 1,729,071. 2,317,401. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 350,265. 326,600. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 350,265. 326,600. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here \(\bigsep \bigsep X \) and complete lines 27 through 29, and lines 33 and 34. Assets or Fund Balances <74,996.>27 30,010. 27 Unrestricted net assets 1,453,802. 1,960,791. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 Š

> 2,317,401. Form 990 (2016)

1,990,801.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,378,806.

1,729,071.

33

34

Form	990 (2016) AND EDUCATION	<u> 26-00</u>	06579	_Pag	_{le} 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	4,542		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,930		
3	Revenue less expenses. Subtract line 2 from line 1	3			95.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,378	3,8	<u>06.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	_8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,990	<u>, 8</u>	<u>01.</u>
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				;
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	1 1	i	ال ا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	[[ı
	separate basis, consolidated basis, or both.				i
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:		1 1		
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audıt,	1 1		_
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	iedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audıt			_ 1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit	1 1		

Form **990** (2016)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Nam	e of t	he organization		CENTER FOR EDUCATION	ORGANIZATIO	NAL R	ESEAR	СН		identification number 6 – 0 0 0 6 5 7 9
Pa	rt I	Reason for F			All organizations must co	mplete th	ıs part.) Se	e instruction		
					For lines 1 through 12, o					
1		· ·			on of churches described	•				
2	芦	•		-	Attach Schedule E (Form			·//~//·/•		
3	一				anization described in se			ii)		
4	Ħ			_	njunction with a hospital				Miii). Enter	the hospital's name
•		city, and state.		.aor. operates in ee		4000		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,(,1 12.110.	are neophare name,
5	\Box		perated for	or the benefit of a co	llege or university owner	d or opera	ted by a g	overnmental	unit describ	ed in
•		section 170(b)(1)			<i>g</i> =	, -,	, 3			
6	\Box			•	nental unit described in :	section 17	70(b)(1)(A)	(v).		
_	X		_	=	intial part of its support f				the general	public described in
-		section 170(b)(1)(30	, a.z., a.z., a.z., a.z.
8				•	(1)(A)(vi). (Complete Par	: 11.)				
9					in section 170(b)(1)(A)(ed in conii.	inction with a	land-grant	college
•					culture (see instructions).				-	-
		university.		g	,			,,		
10		·	at norma	ully receives, (1) more	than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	nd gross receipts from
					ct to certain exceptions,					
					(less section 511 tax) fr				· ·	-
		See section 509(a			,			•	Ü	,
11		An organization or	ganized	and operated exclus	avely to test for public sa	fety See	section 50	09(a)(4).		
12		An organization or	ganized	and operated exclus	sively for the benefit of, to	perform	the functio	ons of, or to c	arry out the	purposes of one or
		more publicly supp	ported or	rganizations describe	ed in section 509(a)(1) o	rsection	509(a)(2)	See section	509(a)(3). (Check the box in
		lines 12a through	12d that	describes the type of	of supporting organization	n and con	nplete line:	s 12e, 12f, ar	nd 12g	
а		Type I. A suppor	rting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganızatıon(s),	typically by	giving
		the supported of	rganizati	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
		organization. Yo	u must d	complete Part IV, S	ections A and B.					
b		Type II. A suppo	orting org	anization supervised	d or controlled in connec	tion with it	ts support	ed organızatı	on(s), by ha	ving
		control or manag	gement d	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	ported
		organization(s).	You mus	st complete Part IV,	Sections A and C.					
c	: L_	J Type III function	nally inte	egrated. A supportin	ig organization operated	ın connec	tion with,	and functiona	ally integrate	ed with,
		its supported or	ganızatıo	n(s) (see instruction:	s). You must complete l	Part IV, Se	ections A,	D, and E.		
c	ı L_	☐ Type III non-fur	nctionall	y integrated. A supp	oorting organization opei	ated in co	nnection v	with its suppo	orted organi	zation(s)
		that is not functi	ionally in	tegrated The organi	zation generally must sa	tisfy a dist	ribution re	quirement ar	id an attent	iveness
		requirement (see	e instruct	tions). You must coi	mplete Part IV, Sections	s A and D	, and Part	٧.		
e	, [_	□ Check this box i	f the org	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type	e II, Type III	
		functionally integ	grated, o	r Type III non-function	onally integrated support	ıng organı	zation.			
1	Ent	er the number of su	pported	organizations						L
	_		formatio	n about the support		(iv) is the orga	nization lieted	1717	 	
		(i) Name of supported organization		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	na document?	(v) Amount o	•	(vi) Amount of other support (see instructions)
		Olganization			above (see instructions))	Yes	No	support (see i		support (see instructions)
							}			
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Tot		Damani, 2:4: 6:4: 1		lation this is			<u> </u>		4.4. 4.5	
LH/	≀ ror	raperwork Reduct	IUN ACT I	Nouce, see the inst	ructions for Form 990 c	ır 990-EZ.	. 632021 09-	-21-16 Sche	aute A (Foi	m 990 or 990-EZ) 2016

13

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 1240566. 1485994. 3559888. 5100664. 4538005.15925117. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 1240566. 1485994. 3559888. 5100664. 4538005.15925117. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 8323905. column (f) 7601212. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2015 (a) 2012 (b) 2013 (c) 2014 (e) 2016 (f) Total 1485994. 1240566. 3559888 5100664. 4538005. 15925117. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 40. 121 104 125 271 661. and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 8,015. 4,875. 1,350. 5,583 4,066. 23,889. assets (Explain in Part VI.) 15949667 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 47.66 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 59.87 15 15 Public support percentage from 2015 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2016

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			-			
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5		 		<u> </u>		
7:	Amounts included on lines 1, 2, and						
ı	3 received from disqualified persons 3 Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
,	Add lines 7a and 7b						
_8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		,		·	· <u> </u>	
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014_	(d) 2015	(e) 2016	(f) Total
9 10:	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ł	b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the organization	s first second +bi	rd fourth or fifth	tay year as a cochi	on 501/c)/3\ crassin	zation.
1-4	check this box and stop here	tile organization	o mar, secona, m	ra, rourin, or min	ian year as a secu	on so noganiz	Lation,
Se	ction C. Computation of Publ	ic Support Pe	ercentage			-	
15			<u>_</u>	column (f))		15	%
16		• •	· ·			16	<u>%</u>
	ction D. Computation of Inve						
17	Investment income percentage for 20)16 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18						18	%
	a 33 1/3% support tests - 2016. If the		·	on line 14, and lin	e 15 is more than		
	more than 33 1/3%, check this box a						▶□
	b 33 1/3% support tests - 2015. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and s	stop here. The org	anızatıon qualıfıes	as a publicly supp	oorted organization	▶□
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	<u> </u>

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizatio								
SECTION A. AN SUDDOLUNG OLDANIZARO	ns	anizatio	Org	ortina	Supp	All	Ä.	Section

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (f applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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Pai	t IV Supporting Organizations (continued)		12-	
44	Healtho organization accounted a gett or contribution from any of the following persons?		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		ļ	l
а	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b	 	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	├	
	tion B. Type I Supporting Organizations		·——	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			1
	controlled the organization's activities. If the organization had more than one supported organization,			١,
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_1	<u> </u>	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		1	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	İ		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1	}	1
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			}
	or management of the supporting organization was vested in the same persons that controlled or managed	ĺ.	ł	Ì '
<u></u>	the supported organization(s).	11	Щ.	L
Sec	tion D. All Type III Supporting Organizations		1	T
4	Did the executation provide to each of its supported executations, but he lest day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		{	1
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		1	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	- ·	+ -	
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1		1
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	1]
3	By reason of the relationship described in (2), did the organization's supported organizations have a		1	
	significant voice in the organization's investment policies and in directing the use of the organization's		ĺ	İ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	j]
	supported organizations played in this regard.	з	L	
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see inst	uctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	y (see instruction:	$\overline{}$	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	i		l
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1	1	}
	how the organization was responsive to those supported organizations, and how the organization determined	-	Į.	l
	that these activities constituted substantially all of its activities.		╁—	├
b	, , , , , , , , , , , , , , , , , , , ,	1		1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the]		[
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b	↓	₩
3	Parent of Supported Organizations. Answer (a) and (b) below.]		
а	, , , , , , , , , , , , , , , , , , , ,	_	1	1
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	+	
b	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	امد		-
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			Щ.

Schedule A (Form 990 or 990-EZ) 2016 AND EDUCATION 26-0006579 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year). a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Lheck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

Schedule A (Form 990 or 990-EZ) 2016 AND EDUCATION 26-0006579 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2016 from Section C, line 6 10 Line 8 amount divided by Line 9 amount **Underdistributions** Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2016 Amount for 2016 Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI) See instructions Excess distributions carryover, if any, to 2016. b c From 2013 d From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount Carryover from 2011 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2016 from Section D, a Applied to underdistributions of prior years b Applied to 2016 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions Excess distributions carryover to 2017. Add lines 3j and 4c 8 Breakdown of line 7: b Excess from 2013 c Excess from 2014

Schedule A (Form 990 or 990-EZ) 2016

d Excess from 2015 e Excess from 2016

THE CENTER FOR ORGANIZATIONAL RESEARCH 26-0006579 Page 8 Schedule A (Form 990 or 990-EZ) 2016 AND EDUCATION Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: SPEECH HONORARIUM 5,000. 2012 AMOUNT: \$ EXPENSE REIMBURSEMENT INCOME 2012 AMOUNT: \$ 2,993. 4,844. 2013 AMOUNT: 1,294. 2014 AMOUNT: 4,083. 2015 AMOUNT: 2016 AMOUNT: 4,054. REPRINT PERMISSION FEE BUMPER STICKER SUBSIDY PUBLICATION SUBSIDY 2015 AMOUNT: \$ 1,000. PUBLIC DISCLOSURE COPY FEE INCOME 2012 AMOUNT: 22. 2013 AMOUNT: 31. 56. 2014 AMOUNT: MISCELLANEOUS INCOME 2016 AMOUNT: \$ 12. VIDEO PRODUCTION SUBSIDY 2015 AMOUNT: \$ 500.

632028 09-21-16

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• ;	Section 501(c)(4), (5), or (6) organiza	tions. Complete Part III.			
	ne of organization THE CEN	TER FOR ORGANIZAT	IONAL RESEA	RCH Emp	loyer identification number
	AND EDU				26-0006579
Pa	art I-A Complete if the orc	ganization is exempt unde	r section 501(c) c	or is a section 527 of	organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures	campaign activities in		s
Ps	art I-B Complete if the ord	ganization is exempt unde	r section 501(c)(3		
	Enter the amount of any excise tax			<i>y</i> -	
	Enter the amount of any excise tax	•		▶ 9	š
	If the organization incurred a section				Yes No
	Was a correction made?		,		Yes No
_t	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for sect	ion 527 exempt functi	on activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to other	er organizations for sec		
	exempt function activities			▶ :	·
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here an	d on Form 1120-POL,	.	
	line 17b	4400 DOI ()		> (·
	Did the filing organization file Form		\ -f -!!t 507!	A	Yes No
5	Enter the names, addresses and er made payments. For each organization		•	-	
	contributions received that were pr				•
	political action committee (PAC). If			·	210 203.034.02 10.14 0.14
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(=)	(=, -, -, -, -, -, -, -, -, -, -, -, -, -,	}	filing organization's	contributions received and
				funds. If none, enter -0-	promptly and directly
			· Ho		delivered to a separate political organization.
			<u> </u>		If none, enter -0
		L			<u> </u>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

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Schedule C (Form 990 or 990-EZ) 2016				ATIONAL RES		006579 Page 2
Part II-A Complete if the org	anization is	exem	pt under section	501(c)(3) and fil	ed Form 5768 (el	ection under
section 501(h)).				(-)(-)		
A Check . if the filing organizat	tion belongs to a	n affilia	ted group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share	_				•	
B Check D if the filing organizat	tion checked bo	A and	"limited control" pro	visions apply.		
Limit	ts on Lobbying l	•	litures ts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public on	non (ar	ass roots lobburg)		0.	
b Total lobbying expenditures to influ	-		• •		18,575.	
c Total lobbying expenditures (add lii	-	e bouy	(direct lobbying)		18,575.	
d Other exempt purpose expenditure	•				3,911,772.	
e Total exempt purpose experioriture		nd 1d)			3,930,347.	
f Lobbying nontaxable amount. Ente	•	,	ollowing table in both	a columns	346,517.	
If the amount on line 1e, column (a) o			ring nontaxable amo		0.0,027	
Not over \$500,000			e amount on line 1e.			
Over \$500,000 but not over \$1,000			plus 15% of the exce	ess over \$500,000		
Over \$1,000,000 but not over \$1,5			plus 10% of the exce			
Over \$1,500,000 but not over \$17,			plus 5% of the exces			
Over \$17,000,000		,000,00				
			-			
g Grassroots nontaxable amount (en	ter 25% of line 1	f)			86,629.	
h Subtract line 1g from line 1a If zero		-			0.	
i Subtract line 1f from line 1c If zero					0.	
j If there is an amount other than ze	ro on either line	1h or lir	ne 11, did the organiza	ation file Form 4720	·	·
reporting section 4911 tax for this	year?				[Yes No
(Some organizations the	hat made a sect	ion 50	aging Period Under 1(h) election do not e instructions for lir	have to complete all	of the five columns b	elow.
	Lobbying	xpend	litures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013		(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	201,1	49.	348,366.	317,098.	346,517.	1,213,130.
b Lobbying ceiling amount (150% of line 2a, column(e))						1,819,695.
c Total lobbying expenditures	5	58.	6.	8,295.	18,575.	27,434.
d Grassroots nontaxable amount	50,2	87.	87,092.	79,275.	86,629.	303,283.
e Grassroots ceiling amount (150% of line 2d, column (e))						454,925.
f Grassroots lobbying expenditures		5.	6.	0.	0.	11.

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 AND EDUCATION 26-000657 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

ing activity	(a	<u>, </u>	(b	<u> </u>
	Yes	No	Amo	unt
g the year, did the filing organization attempt to influence foreign, national, state or				
legislation, including any attempt to influence public opinion on a legislative matter				
erendum, through the use of.	1			
teers?				
staff or management (include compensation in expenses reported on lines 1c through 1i)?				
a advertisements?				
ngs to members, legislators, or the public?				
cations, or published or broadcast statements?	<u></u>			
s to other organizations for lobbying purposes?				
t contact with legislators, their staffs, government officials, or a legislative body?				
s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
activities?				
Add lines 1c through 1i				
ne activities in line 1 cause the organization to be not described in section 501(c)(3)?				
es," enter the amount of any tax incurred under section 4912				
s," enter the amount of any tax incurred by organization managers under section 4912				
filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	on 501(c)	(5), or se	ction	
501(c)(6).	-			
			Yes	No
substantially all (90% or more) dues received nondeductible by members?		1		
		2	_ _	
	he prior vea			
			ction	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	l "No," Ol	R (b) Par	t III-A, lir	ne 3, i
answered "Yes."				
, assessments and similar amounts from members		1		
	ical			
nses for which the section 527(f) tax was paid).		- }	!	
ent year		2a	ı	
•				
egate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
cices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
•				
the erganization sarge to corniquer to the reasonable estimate of pendeductible labburgs and		1 1		
the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	pomioai			
the organization agree to carryover to the reasonable estimate of nondeductible lobbying and nditure next year? ble amount of lobbying and political expenditures (see instructions)	pontiou	4 5		
	cations, or published or broadcast statements? s to other organizations for lobbying purposes? c contact with legislators, their staffs, government officials, or a legislative body? s, demonstrations, seminars, conventions, speeches, lectures, or any similar means? activities? Add lines 1c through 1i he activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filling organization incurred a section 4912 tax, did it file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). substantially all (90% or more) dues received nondeductible by members? he organization make only in-house lobbying expenditures of \$2,000 or less? he organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." A sasessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political section 527(f) tax was paid). Both the section 527(f) tax was paid).	pations, or published or broadcast statements? Is to other organizations for lobbying purposes? It contact with legislators, their staffs, government officials, or a legislative body? Is, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Is activities? Add lines 1c through 1i It activities in line 1 cause the organization to be not described in section 501(c)(3)? Is, "enter the amount of any tax incurred under section 4912 Is, "enter the amount of any tax incurred by organization managers under section 4912 If lining organization incurred a section 4912 tax, did it file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Substantially all (90% or more) dues received nondeductible by members? The organization make only in-house lobbying expenditures of \$2,000 or less? The organization agree to carry over lobbying and political campaign activity expenditures from the prior year Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes." In assessments and similar amounts from members The organization of the section 527(f) tax was paid). The organization is exempt under section for include amounts of political intensions of the political expenditures (do not include amounts of political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political expenditures (do not include amounts of political intensions of the political intensions of the political intensions of the political intensions of the political expenditures (do not include amounts of political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the political intensions of the	cations, or published or broadcast statements? Is to other organizations for lobbying purposes? It contact with legislators, their staffs, government officials, or a legislative body? Is, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Is activities? Add lines 1c through 1i It is activities in line 1 cause the organization to be not described in section 501(c)(3)? Is, "enter the amount of any tax incurred under section 4912 Is," enter the amount of any tax incurred by organization managers under section 4912 If lining organization incurred a section 4912 tax, did it file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). Substantially all (90% or more) dues received nondeductible by members? In er organization make only in-house lobbying expenditures of \$2,000 or less? In er organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Paranswered "Yes." In assessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political inses for which the section 527(f) tax was paid). In the year over from last year	actions, or published or broadcast statements? s to other organizations for lobbying purposes? contact with legislators, their staffs, government officials, or a legislative body? s, demonstrations, seminars, conventions, speeches, lectures, or any similar means? activities? Add lines 1c through 1i ne activities in line 1 cause the organization to be not described in section 501(c)(3)? s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred under section 4912 s," enter the amount of any tax incurred by organization managers under section 4912 filling organization incurred a section 4912 tax, did if file Form 4720 for this year? A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines answered "Yes." assessments and similar amounts from members on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political interest of which the section 527(f) tax was paid). The contract with legislators for which the section 527(f) tax was paid). The contract with legislators for expenditures (do not include amounts of political interest over from last year

SCHEDULE D

` (Form 990)

Department of the Treasury Internal Revenue Service .

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

THE CENTER FOR ORGANIZATIONAL RESEARCH Emplo

16 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

	AND EDUCATION		26-0006579
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	1 funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	-	
•	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?	or donor advisor, or for any other purpose of	Yes No
Par		ganization answered "Ves" on Form 990. Pa	
			it iv, in e 7.
1	Purpose(s) of conservation easements held by the organizat		eally resourcest land area
	Preservation of land for public use (e.g., recreation or	· —	ically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	fied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the o	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conse	rvation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation	on easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense s	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes th	ne organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue stateme	ent and balance sheet works of art.
	historical treasures, or other similar assets held for public ex	•	·
	the text of the footnote to its financial statements that described		, , , , , , , , , , , , , , , , , , , ,
h	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items.	subtrion, or rescaron in radicionales of publi	io service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		▶ ¢
			*
^	(ii) Assets included in Form 990, Part X	nonurae or other similar assets for fire and t	\$
2	If the organization received or held works of art, historical tre	· · · · · · · · · · · · · · · · · · ·	gain, provide
	the following amounts required to be reported under SFAS	i to (ASC 958) relating to these items.	. .
a	Revenue included on Form 990, Part VIII, line 1		5
_	Assets included in Form 990, Part X		<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Schedule D (Form 990) 2016

632051 08-29-16

	dule D (Form 990) 2016 AND EDU					-			06579	Page 2
Par	t III Organizations Maintaining C	collections of A	<u>rt, Hist</u>	torical Tr	easures, c	or Othe	er Simila	r Asse	ts continue	∌d)
3	Using the organization's acquisition, accessi	on, and other record	is, checl	any of the	following tha	t are a s	ignificant us	se of its	collection r	tems
	(check all that apply)		_							
а	Public exhibition	c	, <u> </u>	Loan or exci	hange progra	ams				
b	Scholarly research	e	, 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further tl	ne organizati	on's exe	mpt purpos	e in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets		=	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	reported an amount on Form 990, Par		ete if the	organizatio	n answered '	"Yes" or	Form 990,	Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	s or other as	sets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	table.						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liab	ılıty?	<u></u>	Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.									
Pai	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" on Fo	orm 990, Parl	t IV, line	10.			
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three ye	ars back	(e) Four yo	ears back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs]		l				<u>l</u>	
f	Administrative expenses									
g	End of year balance					_				
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	zation tha	at are held a	ind administe	ered for	the organiza	tion		
	by·								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requ	ired on S	Schedule R?	1				3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Pa	rt VI Land, Buildings, and Equipn									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	V, line 11a. S	See Form 990), Part X	, line 10.			
	Description of property	(a) Cost or		, , ,	or other	(c) A	ccumulated	1	(d) Book	value
		basis (invest	ment)	basis	(other)	de	preciation			
1a	Land									
þ	Buildings									
С	Leasehold improvements									
d	Equipment			1	9,733.		19,73	3.		0.
e	Other									
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Par	t X, colui	nn (B), line	10c.)			▶□		0.

Complete if the organization answered "Yee" of	n Form 000 Dod 11	Line 11h See Form 000	Bort V. line 10	
Complete if the organization answered "Yes" of a Description of security or category (including name of security)	(b) Book value			d-of-year market value
1) Financial derivatives				
2) Closely-held equity interests				
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990, Part IV	/, line 11c. See Form 990,	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV	/, line 11d. See Form 990,	Part X, line 15	
(a) [Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)			
Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV		n 990, Part X, line 25	5
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

	THE CENTER FOR ORGANIZATIONA		00 (000000
_	dule D (Form 990) 2016 AND EDUCATION			0006579 Page 4
Pai	T XI Reconciliation of Revenue per Audited Financial Statement	ts with Revenue per R	eturn	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		— Т	7 500 420
1	Total revenue, gains, and other support per audited financial statements		1	7,528,432.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_ 1		
а	Net unrealized gains (losses) on investments	2a 2 006 000		
b	<u> </u>	2b 2,986,090.		
С	· · · · · · · · · · · · · · · · · · ·	2c		
d	,	_2d		2 006 000
е	3		2e	2,986,090.
3	Subtract line 2e from line 1		3	4,542,342.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		
а	· · · · · · · · · · · · · · · · · · ·	4a		
þ	` '	4b	1	0
C	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		_5	4,542,342.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemer	nts With Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	6,916,437.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1		
а	Donated services and use of facilities	2a 2,986,090.		
b	Prior year adjustments	2b		
C	Other losses	2c	1	
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	2,986,090.
3	Subtract line 2e from line 1		3	3,930,347.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b	Other (Describe in Part XIII.)	4b		_
	Add lines 4a and 4b		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	3,930,347.
Pa	rt XIII Supplemental Information.			
Prov	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV	, lines 1b and 2b; Part V, line	4, Part	X, line 2, Part XI,
lines	s 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal information.		
PA	RT X, LINE 2:			
MA	NAGEMENT HAS EVALUATED THE EFFECT OF GUIDANG	CE PROVIDED BY	<u> </u>	<u>GENERALLY</u>
<u>AC</u>	CEPTED ACCOUNTING PRINCIPLES FOR UNCERTAINTY	Y IN INCOME TAX	ES.	MANAGEMENT
BE	LIEVES THAT THE CENTER CONTINUES TO SATISFY	THE REQUIREMEN	TS (OF A
TA	X-EXEMPT ORGANIZATION AT DECEMBER 31, 2016.	MANAGEMENT HAS	EV	ALUATED ALL
OT	HER TAX POSITIONS THAT COULD HAVE A SIGNIFIC	CANT EFFECT ON	THE	FINANCIAL
ST	ATEMENTS AND DETERMINED THE CENTER HAD NO U	NCERTAIN INCOME	TA	K POSITIONS
ΑT	DECEMBER 31, 2016. THE CENTER'S TAX RETURNS	S FOR THE TAX Y	EAR:	FROM 2013
TH	ROUGH 2015 ARE SUBJECT TO EXAMINATION BY THE	E INTERNAL REVE	NUE	SERVICE.

Schedule D	(Form 990) 2016			ORGANIZATIONAL RESEARCH	26-0006579 Page 5
Part XIII	(Form 990) 2016 Supplemental In	formation	(continued)		
<u> </u>			· · · · · · · · · · · · · · · · · · ·		
					
	· 				
	_ _				
					
					
			 		
					
					

OMB No 1545-0047 Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. CENTER FOR ORGANIZATIONAL RESEARCH General Information on Grants and Assistance AND EDUCATION THE Name of the organization Department of the Treasury Internal Rovenue Service SCHEDULE I (Form 990) Part

% ⊠ Employer identification number 26-0006579 SEADERS 2016 ACTIVITIES Open to Public AGRICULTURE AND RURAL (h) Purpose of grant SPONSORSHIP OF STATE ∏ Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) °. (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. 500 (d) Amount of cash grant (c) IRC section (if applicable) 501(C)(3) 20-4400600 (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization LEADERS - 21547 HWY S27 - ALDEN STATE AGRICULTURE AND RURAL or government

IA 50006

Part II

~	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1
.,,	Enter total number of other organizations listed in the line 1 table	A
15	LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule I (Form 990) (2016)

Page 2

26-0006579

AND EDUCATION

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2016) Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information. PERFORMED DUE DILIGENCE ON THE RECIPENT TO ENSURE THE ORGANIZATION WAS A NONPROFIT IN GOOD STANDING AND THE FUNDS WERE EXPENDED IN COMPLIANCE (d) Amount of non-cash assistance (c) Amount of cash grant AND FULFILLMENT OF ITS MISSION AND GRANT PURPOSE. (b) Number of recipients (a) Type of grant or assistance PART I, LINE 2:

Schedule I (Form 990) (2016)

632102 11-01-16

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

16

Open To Public

														opeou		
Name of the				R FOR OR	GAN	IZA	TIO	NAL RES	ΕĀ	RCH		-	ident		on nu	mber
Part I		ND EDU			24 (5) (0)	\ ===:	50	1/-\/4\ 50	M (- 1	(00)			065	79		
Parti	Excess Bene												\ L			
1	Complete if the o	rganization						ine 25a or 25t	o, or	Form 990-EZ, P	art V,	ine 40	JD	(4)	Corro	
(a) Name of disqualified person			(b) Relationship between disqualified person and organization				illeu	(c) Description of transaction				n		Ye	$\overline{}$	cted? No
				 -										+-``	" -	110
														L		
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	the amount of tax ii on 4958	ncurred by	tne o	rganization mar	agers	or also	quaime	a persons au	rıng	tne year under		•				
	the amount of tax,	ıf anv. on lıı	ne 2. a	above, reimburs	ed by	the or	ganiza	tion				► \$				
2.110		•	•		-		94,1124					Ψ				
Part II	Loans to and	or Fron	n Int	erested Per	sons											
	Complete if the o						, Part	V, line 38a or l	Forn	n 990, Part IV, lin	ne 26,	or if th	ne orga	anızatı	on	
	reported an amou					_				_ _			VIN An	nroved		
	a) Name of ested person	(b) Relation with organiz			(d) Loan to or from the			(e) Original ncipal amount		(f) Balance due		(g) In (b) default?		y board or ommittee? agreem		
			Zulion Orioan		organization?			principal amount				 				
					То	From					Yes	No	Yes	No	Yes	No
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Total		L						▶ \$			_					<u> </u>
Part III	Grants or As	sistance	Ber	nefiting Inte	reste	d Pe	rsons	3.								
	Complete if the c	organization	ansv	vered "Yes" on	Form 9	90, P	art IV, I	ine 27.		,						
(a) N	lame of interested p	person	1 ((b) Relationship				c) Amount of		(d) Type		ļ	•) Purp		f
			interested person and the organization			a	assista		assistai		ice			assistance		
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2016

Schedule L (Form 990 or 990-EZ) 2016 AND EDUCATION 26-0006579 Page 2 Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (e) Sharing of (b) Relationship between interested (a) Name of interested person (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No INC. MANAGEMENT COMPANY 1,639,591. SEE PART RICHARD BERMAN & CO, X Part V **Supplemental Information** Provide additional information for responses to questions on Schedule L (see instructions). SCHEDULE L, PART IV - DESCRIPTION OF SERVICES: SERVICES PROVIDED INCLUDE RESEARCH AND MONITORING/ANALYSIS ON ISSUES IMPORTANT TO THE ORGANIZATION, ADVERTISING, PUBLIC AND MEDIA RELATIONS, PROGRAM MANAGEMENT AND PROMOTION OF INFORMATION TO THE PUBLIC, ACCOUNTING AND FINANCIAL OPERATIONS, MANAGEMENT, GENERAL AND MEETING PLANNING, AND ADDITIONAL SERVICES AS NEEDED IN ADMINISTRATIVE, MEETING THE OBJECTIVE OF THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION IN THE FULFILLMENT OF ITS MISSION AND EXEMPT PURPOSES. Schedule L (Form 990 or 990-EZ) 2016

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ
Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2016

Open to Public Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

THE CENTER FOR ORGANIZATIONAL RESEARCH Emplo AND EDUCATION

Employer identification number 26-0006579

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ATTACKING THOSE CHOICES; PROVIDING EDUCATIONAL INFORMATION TO
POLICYMAKERS, THE MEDIA AND THE GENERAL PUBLIC. EXPOSING THE FUNDING,
AGENDA AND TACTICS OF A VARIETY OF ACTIVIST GROUPS.
FORM 990, PAGE 1, ITEM C: DOING BUSINESS AS:
THE CENTER FOR CONSUMER FREEDOM
HUMANEWATCH
ENVIRONMENTAL POLICY ALLIANCE
HUMANE SOCIETY FOR SHELTER PETS
THE CENTER FOR ACCOUNTABILITY IN SCIENCE
FORM 990, PAGE 1, ITEM J: WEBSITES INCLUDE THE FOLLOWING:
COREPROJECTS.COM, CONSUMERFREEDOM.COM, ACTIVISTFACTS.COM,
HUMANEWATCH.ORG, PETAKILLSANIMALS.COM, HUMANEFORPETS.ORG,
CREWEXPOSED.COM, ENVIRONMENTALPOLICYALLIANCE.COM, BIGGREENRADICALS.COM,
ACCOUNTABLESCIENCE.COM, EPAFACTS.COM, GREENDECOYS.COM, PROP65SCAM.COM
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GOVERNMENT REGULATION AND ELIMINATE CONSUMER CHOICE; TO EDUCATE THE
PUBLIC ABOUT ORGANIZATIONS, THEIR FUNDING SOURCES AND THEIR PROGRAM
ACTIVITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PRESS RELEASES, OPINION EDITORIALS, AND LETTERS TO THE EDITOR
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization THE CENTER FOR ORGANIZATIONAL RESEARCH **Employer identification number** 26-0006579 AND EDUCATION TRIGGERING COVERAGE IN RADIO/TV AND ONLINE/PRINT NEWS OUTLETS. IN ADDITION TO THE EXPENSES NOTED ABOVE, CORE RECEIVED AND UTILIZED APPROXIMATELY \$2,476,345 IN DONATED MEDIA AND OTHER SERVICES TO PROMOTE HUMANEWATCH.ORG. PROVIDED EDUCATIONAL INFORMATION ABOUT HSUS TO FEDERAL AND STATE LEGISLATORS AND STAFF. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: CONDUCT RESEARCH AND PROMOTE ACCOUNTABLESCIENCE.COM TO THE MEDIA AND THE PUBLIC. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: MAINTAINED THE ENVIRONMENTAL POLICY ALLIANCE PROJECT (INCLUDING BIGGREENRADICALS.COM, EPAFACTS.COM, GREENDECOYS.COM, AND STOPTHEEPA.COM) WHICH EDUCATES THE PUBLIC ABOUT ENVIRONMENTAL ACTIVISTS, THEIR AGENDAS THAT AFFECT CONSUMER CHOICES, THEIR DEEP CONNECTIONS WITH GOVERNMENT AGENCIES, THEIR FUNDING SOURCES, AND MANY OF THEIR TACTICS INVOLVING ESTABLISHING FRONT GROUPS. ENGAGED IN ISSUE RESEARCH, PROVIDING INFORMATION ON ENVIRONMENT-RELATED ISSUES VIA MULTIPLE WEBSITES, REGULARLY UPDATED BLOGS, TRADITIONAL MEDIA OUTREACH, SOCIAL MEDIA CAMPAIGNS, AND PRODUCING AND DISTRIBUTING ONLINE VIDEOS. EXPENSES \$ 32,124. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. MAINTAINED THE ACTIVISTFACTS.COM WEBSITE. CONTINUED RESEARCHING, PRODUCING, AND UPDATING IN-DEPTH PROFILES OF ORGANIZATIONS, CELEBRITIES, FOUNDATIONS, AND KEY PLAYERS ACTIVE IN PUBLIC POLICY DEBATES. CONTINUED TO PROMOTE CREWEXPOSED.COM, A WEBSITE FEATURING A POLICY REPORT AND EXPOS ON THE CENTER FOR RESPONSIBILITY AND ETHICS IN

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

RECEIVED OVER \$4,875 IN DONATED MEDIA TO ASSIST IN PROMOTING MESSAGES

EXPENSES \$ 3,399. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MAINTAINED THE WEBSITE AND SOCIAL MEDIA PRESENCE OF WWW.PETAKILLSANIMALS.COM, INCLUDING RESEARCH TO UPDATE THE INFORMATION ABOUT PETA'S PRACTICE OF PET EUTHANIZATION. PROMOTED THE WEBSITE WITH PRESS RELEASES, OPINION EDITORIALS, AND LETTERS TO THE EDITOR, RESULTING IN COVERAGE IN MEDIA PUBLICATIONS. UTILIZED NEARLY \$85,000 IN DONATED SERVICES TO CONDUCT RESEARCH AND PROMOTE PETAKILLSANIMALS.COM AND THE SITE RECEIVED MORE THAN 325,000 VISITS IN 2016. EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 3:

THROUGH THE VARIOUS WEBSITES.

RICHARD BERMAN AND COMPANY, INC. IS THE MANAGEMENT COMPANY FOR THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION. RICHARD BERMAN, PRESIDENT AND EXECUTIVE DIRECTOR OF THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION, WAS COMPENSATED AS PRESIDENT OF RICHARD BERMAN AND COMPANY, INC. DURING 2016. DUE TO THE CENTER'S ESTABLISHED ACCOUNTING AND FINANCIAL INTERNAL CONTROL PROCESSES, WHICH HAVE BEEN APPROVED BY THE INDEPENDENT AUDITING FIRM, THE CONFIDENTIAL COMPENSATION INFORMATION IS UNAVAILABLE TO THE PREPARER AND SIGNING OFFICER.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION'S FORM 990 WAS MEMBERS OF THE GOVERNING BODY AND OUTSIDE LEGAL REVIEWED BY MANAGEMENT. 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

Employer identification number

26-0006579

FORM 990, PART VI, SECTION B, LINE 12C:

RETURN WAS FILED.

THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION ANNUALLY REQUIRES THE OFFICERS AND DIRECTORS TO READ AND SIGN THE POLICY AND TO DISCLOSE ANY CONFLICT OF INTEREST THEY MAY HAVE TO THE ENTIRE BOARD. THE BOARD THEN DECIDES WHETHER OR NOT THERE EXISTS A CONFLICT. ANY OFFICERS OR BOARD MEMBERS WITH CONFLICTS ARE RECUSED FROM VOTING UPON ISSUES INVOLVING THEIR PARTICULAR CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR THE DIRECTORS AND EMPLOYEES IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS; PERSONS WITH CONFLICTS OF INTEREST REGARDING THE COMPENSATION ARRANGEMENT AT ISSUE ARE RECUSED. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING ARE DONE WITH RESPECT TO DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS WAS REVIEWED FOR THE EXECUTIVE DIRECTOR AND FUNDRAISING POSITIONS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AK, AL, AR, CT, FL, GA, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, OH, OK, OR, PA, RI, SC, TN VA,WI

FORM 990, PART VI, SECTION C, LINE 19:

THE CENTER FOR ORGANIZATIONAL RESEARCH AND EDUCATION DOES NOT MAKE ITS 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization THE CENTER FOR ORGANIZATIONAL RESEARCH	Employer identification number
AND EDUCATION	26-0006579
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FIN	ANCIAL STATEMENTS
AVAILABLE FOR PUBLIC INSPECTION EXCEPT THROUGH THOSE DOC	UMENTS FILED WITH
ITS FORM 1023 EXEMPTION APPLICATION (COPY AVAILABLE UPON	REQUEST AT THE
ORGANIZATION'S HEADQUARTERS IN WASHINGTON, DC) AS REQUIR	ED BY LAW.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
MAILING SERVICES:	
PROGRAM SERVICE EXPENSES	562,659
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	562,659
PAYROLL SERVICE:	
PROGRAM SERVICE EXPENSES	0
MANAGEMENT AND GENERAL EXPENSES	0
FUNDRAISING EXPENSES	929
TOTAL EXPENSES	929
PROGRAM PROMOTION:	
PROGRAM SERVICE EXPENSES	110,521
MANAGEMENT AND GENERAL EXPENSES	
FUNDRAISING EXPENSES	0
TOTAL EXPENSES	110,521
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	674,109
FORM 990, PART XII, LINE 2C	
THE INDEPENDENT MEMBERS OF CORE'S AUDIT COMMITTEE MADE N	O CHANGES IN
SELECTION OF AUDITOR OR OVERSIGHT PROCESS IN 2016.	
632212 08-25-16 Sch	edule O (Form 990 or 990-EZ) (201

AND EDUCATION 26	er identification number - 0 0 0 6 5 7 9
	

632212 08-25-16